PTOISE06 (08-03)
Approved for use through 7/51/2008, OMB 0651-0032
U.S. Petent and Traditional Office; U.S. DEPARTMENT OF COMMERCE

Under the Projection And of 1995, no persons are required to respond to a collection of information unions it displays a varied CMB control number.												
PATENT APPLICATION FEE DETERMINATION RECORD  Bubsilius for Form PTO-875									107763276			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR	HEIMS	MUMQER FILED		NUMBER EXTRA		RATE	FEE	]	RATE	FEE	
67	SC FEE CFR 1.16(a))		•					8	OR		s	
6	AL CLAIMS OFR 1.16(cj)		rolaus 20 =		•		x s		OR	x		
	EPENDENT CLAS CFRLY(S(N))		minus 3 =		•		x1		OR	× 2 •		
MAATIPLE DEPENDENT CLAIM PRESENT \$7 CFR 1.16(4))							+1		OR	+1		
*If the difference in column 1 is less than zero, enter 'O' in column 2.							TOTAL		OR	TOTAL		
	. C	LAIMS AS AM	ENDED :	- PART II		·.	-					
5	5 38/06 (Column 1) (Column 2) (Column 3)					SMALL I	ENTITY	OR		R THAN ENTITY		
MENT A		CLAMS REMAINING AFTER AMERIDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL PEE		RATE	ADOI- TIONAL FEE	
DME	Total profesion	7	Minus	20	-/		X \$*		OR	× 5		
END	(27 CPR 1,1603)	2	Mirco	" 3	-/		x s		OR	x 1	·	
A	FREST PRESENT	ATION OF MALTER	E CEPOIDE	ONT CLARK (37 OF	PA 1.1474D		+8=		OR	+: •		
						' '	TOTAL ADDL FEE		OR	TOTAL ADD'L FEE		
	•	(Column 1)		(Column 2)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
ENT 8	12/286	CLAIMS REMAINING AFTER AMENIMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADO# TIONAL FEE	
暑	Total pr cre Lieus	• 7	<b>Minus</b>	20	•	H	X 4=	•	OR	X 8	7.	
JEN	independent (27 GFB 1.140)3	٠ لم	Minus	- 3	•		X 4=		OR	X 8=		
AM	FREST PRESENTATION OF MULTIPLE DEPENDENT CLAW (27 OFR 1,100)						+1	•	OR	+ 5a		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Cohean 1) (Cohean 2) (Cohean 3)												
ENTC	4/30/07	CLAIMS REMARING AFTER AMERICAMENT		HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
MO	(D) CERN LUNGO	5.	Minus	- W	•		x 6•	·	OR	X \$=		
AMENDMENT	CIT CITE 1/1868	2	Mimus	~ 3·			X 8=		OR	x 3		
₹	FROT PRESENTATION OF MULTIPLE DEPENDENT CLAM (07 CFR 1.18(4))						+ <u>i</u> -		OR	+ 1		
T A									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "V" in column 3. ** If the T-Concal Humber Proviously Peid For" IN THIS SPACE is less than 20, enter "20".												
" If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 70, enter "20", "" If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 71, enter "2", The "Highest Number Previously Paid For" (Total or independent) is the Highest number found in the appendicte box in column 1.												

The Polyhest Number Previously Paid For (Total or Independent) is the registed institute found in the appropriate box on comment.

This collection of information is required by 37 CPR 1.16. The Information is required to obtain or retain a benefit by the public which is to fits (and by the USPTO to process), an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to domplete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the individual case. Any consensits on the enough of the you require to complete this form and/or suggestators for reducing this burdent, enough of the left information Officer, U.S. Potent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-500-PTO-9199 and select option 2.